



Department of Toxic Substances Control


Biennial Hazardous Waste Report

E-mail: brsstaff@dtsc.ca.gov

Office of Environmental Information
Management (OEIM)
Business Operations Unit



WHY DO THIS REPORT?


- Required by law
 - Measures waste minimization efforts in industry groups
 - Improves understanding of hazardous waste generation and management
 - Summarizes and communicates the results of the reporting effort to the public.
- 

WHO HAS TO FILE?


- RCRA Large Quantity Generators (LQGs)
- Treatment, Storage, and Disposal Facilities (TSDFs)



What is a RCRA Large Quantity Generator (LQG) according to (40 CFR §262.41)?

- Generated, in **any single calendar month**, (including quantities imported by importer site) 1,000 kg. (2,200 lbs.) or more of RCRA non-acute hazardous waste, OR
 - Generated, in **any single calendar month or accumulated at any time**, more than 1 kg. (2.2 lbs.) of RCRA acute hazardous waste, OR
 - Generated, in **any single calendar month**, more than 100 kg. (220 lbs.) of spill cleanup material contaminated with RCRA acute hazardous waste.
- 

What Forms are Mandatory?

- RCRA Subtitle C Site Identification Form (SI Form)
 - Generation and Waste Management Form (GM Form) and/or
 - Waste Received from Off-site Form (WR Form)
- 
- A series of white diagonal lines of varying lengths and thicknesses, located in the bottom right corner of the slide.

PLEASE DO NOT SUBMIT...

- OI Forms
- Non-RCRA waste information (unless you are a TSDF)



OI
Non-RCRA

QUICK AND EASY FILING!

Register and file electronically at:

<https://hwts.dtsc.ca.gov/WRS/>



The screenshot shows the homepage of the DTSC's Waste Reporting System. At the top, there is a header with the California Department of Toxic Substances Control logo and navigation links for 'Contact Us' and 'Mobile Gallery'. Below this is a blue navigation bar with the 'CA.GOV' logo and links for 'Main Menu', 'Contact', 'Help', 'Register', and 'Log in'. The main content area has a heading 'Welcome to DTSC's Waste Reporting System' followed by a brief description of the system and a link to 'Register Now' for first-time users. The 'Log Into WRS' section contains a 'Login Name' field, a 'Password' field, and a 'Login' button. There are also links for 'Register' and 'Forgot Password/Login Name?'. A footer at the bottom identifies the page as the 'Waste Reporting System'.

California Department of
Toxic Substances Control

Contact Us Mobile Gallery

CA.GOV Main Menu Contact Help Register Log in

Welcome to DTSC's Waste Reporting System

This system offers you a quick and convenient way to file your Hazardous Waste Report.
If you are using the Waste Reporting System (WRS) for the first time, [Register Now](#).

Log Into WRS

Login Name

Password

Login

[Register](#)
[Forgot Password/Login Name?](#)

Waste Reporting System

Welcome to DTSC's Hazardous Waste Reporting System

The Hazardous Waste Reporting System is designed for hazardous waste generators and facilities to enter and report their hazardous waste activities for the Annual or Biennial Hazardous Waste Report.

Hazardous Waste Report Calendar Year

Select the calendar year of your hazardous waste activities.

Year

2018

Add an ID Number(s) to the reporting year or proceed to the Hazardous Waste Report form entry below.

ID Number

Add ID Number






Assigned ID Numbers - 2017 Hazardous Waste Report Forms and Status

Select the RCRA Subtitle C Site Identification Form (SI Form), Waste Generation Management Form (GM Form) and/or Waste Received from Off-site Form (WR Form) icons below to enter your hazardous waste activities. Once you have completed the applicable forms, select the Submit button to send your Hazardous Waste Report to DTSC for review. You may add, change or update your data any time prior to submission. You may download a copy of your completed report by selecting the PDF icon.

ID Number	Facility Name	SI Form	GM Form	WR Form
-----------	---------------	------------	------------	------------

- Enter or select the calendar year.
- Enter your EPA ID number. Your ID number and facility name will automatically populate.
- If you complete reports for multiple sites, you can add your other ID numbers at this page.

- The pencil over the paper under the form shows the form is not complete. Select SI for your Site Identification form.

ID Number	Facility Name	SI Form	GM Form	WR Form	
CAD	CONTAI				<input type="button" value="Submit"/>  

- If you enter your ID number and decide your site should not complete the report, please select the red X to the right of your report to delete it. This will permanently delete the report from this system.

RCRA SUBTITLE C SITE IDENTIFICATION (SI) FORM

10

Site Identification Form - CA

Reason for Submittal

Site Information

NAICS Code

Site Mailing Address

Site Contact Information

Owner/Operator Information

Regulated Waste Activity

Description of Hazardous Waste

Comments

Review

Reason for Submittal (Mark all that apply)

☒ As a component of the Hazardous Waste Report

☒ Site was a TSD facility and/or generator of >1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)






Save and Exit

<< Previous

Next >>

When you move between sections, please select the “Next” arrow at the bottom right of your screen. You must review the SI form prior to submitting your report.

GENERATION AND WASTE MANAGEMENT (GM) FORM

ID Number	Facility Name	SI Form	GM Form	WR Form	
CAD	CONTAIN				<input type="button" value="Submit"/>  

Select the pencil under GM Form

- At this page, select “Create” to begin your GM form.

Waste Generation and Management - CA

The Waste Generation and Management (GM) Form is for reporting on-site hazardous waste generation and management and off-site shipment in the reporting year. The GM Form is divided into three required sections that document: (1) the source, characteristics, and quantity of hazardous waste generated; (2) the quantity of hazardous waste managed on-site along with the management method used; and (3) the quantity of hazardous waste shipped off-site for treatment, disposal, or recycling along with the off-site management method used.

Description	Quantity	Status	
haz waste...	1500.000000 lbs	Completed	✗
more haz waste...	100.000000 lbs	Incomplete	✗

- If you decide you should not have entered the GM form, please select the red X to the right of your status. This will permanently delete the GM form.

You need a GM Form for each type of waste generated

- Waste generated and shipped in the reporting year,
- Waste generated in the previous year and shipped in the reporting year,
- Waste generated in the reporting year and shipped in the following year.

What goes on the GM Form?

Waste Generation and Management - C

Section 1

Section 1 - Waste Characteristics

Section 2

A. Waste Description ?

Section 3

Section 4

Review

B. EPA Hazardous Waste Code(s) ?

Insert Code

Remove Code From List

C. State Hazardous Waste Code(s) ?

Insert Code

Remove Code From List

SAMPLE MANIFEST

DTSC. 00926. 0036

Form Approved. OMB No. 2050-0039

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAR000090005	2. Page 1 of 5	3. Emergency Response Phone 888-423-6050	4. Manifest Tracking Number 0055883355 JJK
5. Generator's Name and Mailing Address State of CA Dept. of Toxic Substances Control 10111 N. Grandview Glendale, CA 91201 Generator's Phone: 818-664-2922			Generator's Site Address (if different than mailing address) 617 E. 56th Street Los Angeles, CA 90011		
6. Transporter's Company Name Armstrong Integrated Services, Inc.			U.S. EPA ID Number CAR000148338		
7. Date			U.S. EPA ID Number CAD097030993		
8. Designated Facility Name and Site Address Armstrong Integrated Services, Inc. 575 South Bayview Avenue Los Angeles, CA 90011 Facility's Phone: 323-277-1500			U.S. EPA ID Number CAD097030993		
9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group, if any)	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group, if any)	10. Containers No. Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
NA3082, Hazardous Waste Liquid, N.O.S., 9, PGIII		1 TT	1,600	G	132 D007
14. Special Handling Instructions and Additional Information Wear appropriate PPE while handling. Weights or volumes are approximate. Water contaminated with Chromium Job #: 25003-19 Project: P169175 R565297 D130520					
15. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name on behalf of DTSC			Signature Month Day Year 13/11/09		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:		
17. Transporter Acknowledgment of Receipt of Materials					
Transporter 1 Printed/Typed Name TRANSPORTER'S PRINTED NAME HERE			Signature TRANSPORTER'S SIGNATURE HERE Month Day Year 13/11/09		
Transporter 2 Printed/Typed Name			Signature		
18. Discrepancy					
18a. Discrepancy Indication Space: <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
18b. Alternate Facility (or Generator) Marking Reference Number: U.S. EPA ID Number					
Facility's Phone: Month Day Year					
18c. Signature of Alternate Facility (or Generator)					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1. 2. 3. 4.					
20. Designated Facility Owner or Officer: Certification of receipt of hazardous materials covered by the manifest except as noted at 18a					
Printed/Typed Name TSDF PRINTED NAME HERE			Signature TSDF SIGNED NAME HERE Month Day Year 12/11/09		

EPA Form 8700-22 (Rev. 3-07) Previous editions are obsolete.

10514.1074

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

You must determine your own Source, Form, and Waste Minimization Codes

D. Source Code ?

Click Here

E. Form Code ?

Click Here

F. Quantity Generated in 2017 ?

0000000000

000000

Select Unit of Measure

000

00

Select Density Unit of Measure

G. Waste Minimization Code ?

Select Waste Minimization Code

Save and Exit

<< Previous

Next >>

SAMPLE MANIFEST

DTSC. 00926. 0036

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator ID Number
CAR000080065

2. Page 1 of 5

3. Emergency Response Phone
888-473-6390

4. Manifest Tracking Number
005588355 JJK

5. Generator's Name and Mailing Address
State of CA Dept. of Toxic Substances Control
1011 N. Grandview
Glendale, CA 91201
Generator's Phone: 818-554-3922

6. Generator's Site Address (if different than mailing address)
617 E. 56th Street
Los Angeles, CA 90011

7. Transporter 1 Company Name
American Integrated Services, Inc.

8. Transporter 2 Company Name

9. U.S. EPA ID Number
CAR000149338

10. U.S. EPA ID Number
CAD097030993

11. Designated Facility Name and Site Address
Siemens Water Technologies
5375 South Boyle Avenue
Los Angeles, CA 90058
Facility's Phone: 323-277-1500

12. U.S. EPA ID Number
CAD097030993

13. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))
NA3082, Hazardous Waste Liquid, N.O.S., 9, PGIII

14. 10. Containers
No. Type
1 T

15. 11. Total Quantity
1,600

16. 12. Unit
G

17. 13. Waste Codes
132 D007

18. Special Handling Instructions and Additional Information
Water appropriate PPE while handling. Weights or volumes are approximate.
Water contaminated with Chromium
Job#: 25003-19 Profit: P169175

19. 20. Generator's/Officer's Certification: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (I am a large quantity generator) or (b) (I am a small quantity generator) is true.

21. Generator's/Officer's Printed/Typed Name
on behalf of DTSC

22. Month Day Year
13/11/09

23. International Shipments
☐ Import to U.S. ☐ Export from U.S.

24. Port of entry/exit:
Date leaving U.S.:

25. Transporter signature (for exports only):

26. Transporter Acknowledgment of Receipt of Materials

27. Transporter 1 Printed/Typed Name
TRANSPORTER'S PRINTED NAME HERE

28. Signature
TRANSPORTER'S SIGNATURE HERE

29. Month Day Year
13/11/09

30. Transporter 2 Printed/Typed Name

31. Signature

32. Month Day Year

33. 18. Discrepancy
18a. Discrepancy Indication Space: ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection

34. 18b. Alternate Facility (or Generator)
Manifest Reference Number
U.S. EPA ID Number

35. Facility's Phone:

36. Signature of Alternate Facility (or Generator)

37. Month Day Year

38. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)

39. 1. 2. 3. 4.

40. 20. Designated Facility Owner or Officiar: Certification of receipt of hazardous materials generated by the manifest except as noted on page 1a
Printed/Typed Name
TSDF PRINTED NAME HERE

41. Signature
TSDF SIGNED NAME HERE

42. Month Day Year
12/11/09

EPA Form 8700-22 (Rev. 3-09) Previous editions are obsolete.

10514.1074

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

Select the "Next" arrow to proceed.

Complete Section 2 only if your site treated, disposed, and/or recycled the waste onsite.

Section 1	Section 2 - On-site Generation and Management of Hazardous Waste	
Section 2	Was any of this waste that was generated at this facility treated, disposed, and/or recycled on site? ?	
Section 3	<input checked="" type="radio"/> Yes <input type="radio"/> No	
Section 4	Process System 1 1 /	
Review	Management Method Code ? Select Management Method Code ▼	Quantity Treated, Disposed, or Recycled on Site in 2017 ? 000000000000 . 000000
	Process System 2 ?	
	Management Method Code Select Management Method Code ▼	Quantity Treated, Disposed, or Recycled on Site in 2017 000000000000 . 000000
	Save and Exit	<< Previous Next >>

Use the information on your manifests to complete Section 3

Section 1

Section 3 - Off-site Shipment of Hazardous Waste

Section 2

A. Was any of this waste that was generated at this facility shipped off site in 2017 for treatment, disposal, or recycling?



☒ Yes ☐ No

Section 3

Section 4

Review

Site 1

B. EPA ID No. of facility to which waste was shipped

C. Management Method Code

Select Management Method Code

D. Total Quantity Shipped in 2017

0000000000 . 000000

Site 2

B. EPA ID No. of facility to which waste was shipped

C. Management Method Code

Select Management Method Code

D. Total Quantity Shipped in 2017

0000000000 . 000000

Site 3

SAMPLE MANIFEST

DTSC. 00926. 0036

Form Approved. OMB No. 2050-0039

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number CAR000090005	2. Page 1 of 5	3. Emergency Response Phone 888-423-6030	4. Manifest Tracking Number 005588355 JJK
5. Generator's Name and Mailing Address State of CA Dept. of Toxic Substances Control 1011 N. Grandview Glendale, CA 91201 Generator's Phone: 818-554-2922					
6. Generator's Site Address (if different than mailing address) 617 E. 58th Street Los Angeles, CA 90011					
7. Transporter 1 Company Name American Integrated Services, Inc. U.S. EPA ID Number CAR000148338					
8. Designated Facility Name and Site Address Siemens Water Technologies 5375 South Boyle Avenue Los Angeles, CA 90058 Facility's Phone: 323-277-1500 U.S. EPA ID Number CAD097030593					
9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type	11. Total Quantity 1,600
1		NA3082, Hazardous Waste Liquid, N.O.S., 9, PGIII		1	TT
2					
3					
4					
14. Special Handling Instructions and Additional Information Wear appropriate PPE while handling. Weights or volumes are approximate. Water contaminated with Chromium Job#: 26003-19 Protocol: P169175 R5652-97 D130520					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Offeror's Printed/Typed Name on behalf of DTSC Month Day Year 13/11/09					
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Transporter signature (for exports only): Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature TRANSPORTER'S SIGNATURE HERE Month Day Year 13/11/09					
Transporter 2 Printed/Typed Name Signature					
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number					
Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H035 2. 3. 4.					
20. Designated Facility Owner or Generator Certification of receipt of hazardous materials governed by the manifest except as noted in 18a Printed/Typed Name TSDF PRINTED NAME HERE Signature TSDF SIGNED NAME HERE Month Day Year 10/31/09					

EPA Form 8700-22 (Rev. 3-09) Previous editions are obsolete.

10514.1074

DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

There are only three (3) receiving facilities for each GM form. If you have more receiving facilities, please create a new form. You must select the “Next” arrow after completing Section 3.

Site 3

B. EPA ID No. of facility to which waste was shipped

C. Management Method Code

Select Management Method Code

D. Total Quantity Shipped in 2017






000000000000 . 000000

Save and Exit


<< Previous

Next >>

- You may enter comments in Section 4 prior to reviewing your GM Form.
- You must review your GM form prior to submittal.
- Select “Exit” to move from the GM Form
- The example below shows the SI and GM forms are complete.

ID Number	Facility Name	SI Form	GM Form	WR Form	
CA	VEC				<input type="button" value="Submit"/>  

WR FORM

- TSDF's ONLY!!
 - **Generators** DO NOT fill out the WR form
 - **ALL** sections for each waste handler **MUST** be completed.
- 
- A series of several parallel white diagonal lines in the bottom right corner of the slide, extending from the bottom edge towards the right edge.

TSDFs also use the manifests for waste received from offsite

21

Waste Received from Off Site - CA

Section 1

Section 1 - Waste Received

Review

A. Description of Hazardous Waste ?

B. EPA Hazardous Waste Code(s) ?

Insert Code

Remove Code From List

C. State Hazardous Waste Code(s) ?

SAMPLE MANIFEST

DTSC. 00926. 0036

Form Approved OMB No. 2050-0039

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

1. Generator ID Number CAR00009006		2. Page 1 of 5	3. Emergency Response Phone 888-423-6090	4. Manifest Tracking Number 005588355 JJK	
5. Generator's Name and Mailing Address State of CA Dept. of Toxic Substances Control 1011 N. Grandview Glendale, CA 91201		Generator's Site Address (if different than mailing address) 617 E. 56th Street Los Angeles, CA 90011			
6. Transporter 1 Company Name Amertown Integrated Services, Inc		U.S. EPA ID Number CAR000148338			
7. Transporter 2 Company Name		U.S. EPA ID Number			
8. Designated Facility Name and Site Address Siemens Water Technologies 5375 South Boyle Avenue Los Angeles, CA 90058		U.S. EPA ID Number CAD0097030963			
Facility's Phone: 323-277-1500					
9a. Haz. Mat.	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	NA3082, Hazardous Waste Liquid, N.O.S., 9, PGIII	1 TT	1,600	G	132 D007
14. Special Handling, Instructions and Additional Information Wear appropriate PPE while handling. Weights or volumes are approximate. Water contaminated with Chromium Job#: 26003-19 Protocol: P169175					
15. GENERATOR/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/carcarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Officer's Printed/Typed Name on behalf of DTSC		Signature		Month Day Year 13/11/09	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:			
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name TRANSPORTER'S PRINTED NAME HERE		Signature		Month Day Year 13/11/09	
Transporter 2 Printed/Typed Name		Signature		Month Day Year	
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number					
Facility's Phone: 18c. Signature of Alternate Facility (or Generator)					
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
20. Designated Facility Owner or Officer: Certification of receipt of hazardous materials covered by the manifest except as noted in 18a					
Printed/Typed Name TSDF PRINTED NAME HERE		Signature		Month Day Year 10/31/09	

EPA Form 8700-22 (Rev. 3-09) Previous editions are obsolete.

10514.1074


DESIGNATED FACILITY TO DESTINATION STATE (IF REQUIRED)

Save and Exit

[Next >>](#)

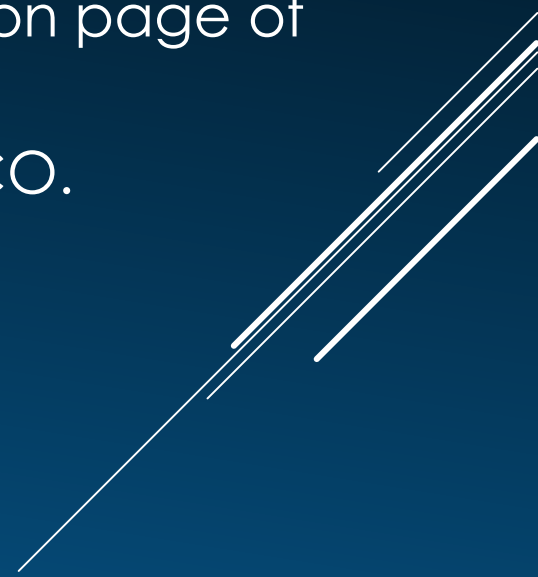
SAMPLE MANIFEST				DTSC 00926.0036	
Please print or type. (Form designed for use on size (12-pitch) typewriter.)				Form Approved OMB No. 2050-0039	
UNIFORM HAZARDOUS WASTE MANIFEST Generator ID Number: CAR00009005		2. Page 1 of 5		3. Emergency Response Phone: 888-473-6050	
4. Manifest Tracking Number: 005588355 JJK		Generator's Site Address (if different than mailing address): 617 E. 58th Street Los Angeles, CA 90011			
5. Generator's Name and Mailing Address: State of CA Dept. of Toxic Substances Control 1011 N. Grandview Glendale, CA 91201		Generator's Phone: 818-554-2922		U.S. EPA ID Number: CAR000148338	
6. Transporter: 1 Company Name: Amertown Integrated Services, Inc.		6. Transporter: 1 Company Name: Amertown Integrated Services, Inc.		U.S. EPA ID Number: CAD0097030953	
7. Transporter: 2 Company Name: Stamens Water Technologies 5375 South Boyle Avenue Los Angeles, CA 90058		7. Transporter: 2 Company Name: Stamens Water Technologies 5375 South Boyle Avenue Los Angeles, CA 90058		U.S. EPA ID Number: CAD0097030953	
8. Designated Facility Name and Site Address: Stamens Water Technologies 5375 South Boyle Avenue Los Angeles, CA 90058		8. Designated Facility Name and Site Address: Stamens Water Technologies 5375 South Boyle Avenue Los Angeles, CA 90058		U.S. EPA ID Number: CAD0097030953	
Facility's Phone: 323-277-1500		Facility's Phone: 323-277-1500			
9a. HM 1		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)): NA3082, Hazardous Waste Liquid, N.O.S., 9, PGIII		10. Containers No. Type 1 TT	
11. Total Quantity 1,600		12. U.S. EPA ID Number G		13. Waste Codes 132 D007	
14. Special Handling Instructions and Additional Information: Wear appropriate PPE while handling. Weights or volumes are approximate. Water contaminated with Chromium. Jobs: 26003-19 Protocol: P169175					
15. GENERATOR/SOFTENER'S CERTIFICATION: I hereby declare that the contents of this assignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this assignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name: on behalf of DTSC Signature: _____ Month: 13 Day: 11 Year: 09 GENERATOR'S/OFFICER'S PRINTED NAME: _____					
16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Part of entry/exit: _____ Date leaving U.S.: _____ Transporter signature (for exports only): _____ 17. Transporter Acknowledgment of Receipt of Materials: Transporter 1 Printed/Typed Name: _____ Signature: _____ Month: 13 Day: 11 Year: 09 TRANSPORTER'S PRINTED NAME HERE TRANSPORTER'S SIGNATURE HERE Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____					
18. Discrepancy: 18a. Discrepancy Indication Space: <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection 18b. Alternate Facility (or Generator): _____ Manifest Reference Number: _____ U.S. EPA ID Number: _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator): _____ Month: _____ Day: _____ Year: _____					
19. Hazardous Waste Report Management Method: _____ Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems): 111901					
20. Designated Facility Owner or Officer: Certification of receipt of hazardous materials covered by the manifest except as noted at 18a: _____ Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ TSDF PRINTED NAME HERE TSDF SIGNED NAME HERE					

When the SI, GM, and/or WR Forms are complete, submit your report.

A series of four parallel white diagonal lines in the bottom right corner of the slide, slanting upwards from left to right.

HELPFUL TIPS

24

- Include your CA waste codes on your SI, GM and/or WR Forms.
 - If you have flat files to submit, save your report to a USB drive (WIN 32 FAT) or CD-ROM, include the signed Site ID form, and send to DTSC.
 - Send DTSC the signed and dated certification page of your SI Form (page 6). *Preferably in blue ink*
 - If you are a TSDF, include your Form CC or CO.
- 
- A series of white diagonal lines of varying lengths and thicknesses, located in the bottom right corner of the slide.

MANDATORY:


25

Send DTSC the signed Certification page of your SI
Form

Department of Toxic Substances Control
Biennial/Annual Report MS 11-27
PO Box 806
Sacramento, CA 95812-0806

OR

Department of Toxic Substances Control
Biennial/Annual Report
1001 I Street MS 11-27
Sacramento, CA 95814



HOW TO CONTACT DTSC:

Email: BRSStaff@DTSC.CA.gov

